



**The Connecticut Children's Trust Fund Council:
Strategic Planning for the Future**

Presented to the Council September 18, 2012

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Statutory Changes to Role of CTF Council

As of 2006..... Prior to DSS Merger

As of 2009..... After DSS Merger

<p>1. The Children’s Trust Fund and its Council is established “as an independent agency within DCF for administrative purposes only (APO)”</p>	<p>1. “There is established a Children’s Trust Fund and a Children’s Trust Fund Council which shall be within the Department of Social Services.”</p>
<p>2. The Council will “employ an executive director and any necessary staff within available appropriations “</p>	<p>2. This provision was repealed. Hiring is now the responsibility of Department of Social Services.</p>
<p>3. “The Children’s Trust Fund Council shall be the lead state agency for community-based prevention programs designed to prevent child abuse and neglect.”</p>	<p>3. “The Department of Social Services shall be the lead state agency for community-based prevention programs designed to prevent child abuse and neglect, in <u>collaboration with the Children’s Trust Fund Council.</u>”</p>
<p>4. As an APO agency, the Council and the Trust Fund may perform its “advocacy and policy making functions independently and without the approval of DCF.” Likewise, the Council and the Trust Fund may exercise any “quasi-judicial, rulemaking or regulatory authority and licensing functions independent and without the approval of the department.”</p>	<p>4. The Council may solicit and advocate on behalf of the Children’s Trust Fund. The Commissioner of DSS may exercise “quasi-judicial, rulemaking or regulatory authority and licensing, policy making and advocacy functions <u>with the advice of the Children’s Trust Fund Council.</u>” Trust Fund staff can no longer act independently of DSS.</p>
<p>5. Members of the Council are either a commissioner of a state agency or a member appointed by legislative leader. Therefore, each member is considered a public official under Connecticut General Statute. The Council and the Trust Fund are audited by the Office of State Ethics who is ultimately responsible for adherence to legal and ethical norms.</p>	<p>5. Unchanged</p>
<p>6. The Council may apply for and accept federal funds, state funds, foundation grants and private gifts to be used for the prevention of child abuse and neglect and family strengthening programs.</p>	<p>6. The Council and the Commissioner may apply for and accept federal funds, state funds, foundation grants and private gifts to be used for the prevention of child abuse and neglect and family strengthening programs.</p>

<p>7. The Council and Trust Fund are responsible for developing the annual budget. Both the Office of Fiscal Analysis and the Office of Policy and Management will review the budget on a continuous basis and these state entities are responsible for ensuring that proper financial controls are in place.</p>	<p>7. The resources of the Children’s Trust Fund shall be used by the Commissioner of DSS with the advice of the Children’s Trust Fund Council. The Department of Social Services shall be responsible for the Trust Fund’s budget, in accordance with general statutes.</p>
<p>8. The Council shall determine, monitor and strengthen the organization’s programs and services. The statute specifies that the Council must “1) develop risk assessments for pilot programs, 2) develop training programs, standards and protocols for programs, and 3) develop, issue and evaluate requests for proposals.” Council’s role in this area is to determine which programs are most consistent with the organization’s mission and to monitor their effectiveness.</p>	<p>8. The statute continues this same language but limits the Council’s authority to Nurturing Families Network. For all other community-based, prevention focused programs and activities designed to strengthen and support families to prevent child abuse and neglect “The Council shall provide guidance to the Commissioner of DSS”</p>
<p>9. The Council is accountable to the public and the legislative body and must annually report to the General Assembly on matters relating to the source and amount of funds received by the Children’s Trust Fund and the manner in which such funds were administered and disbursed. As well, the Council shall report to the General Assembly on implementation and progress of the Nurturing Families Network on January first and July first of each year.</p>	<p>9. “The Children’s Trust Fund Council and the commissioner shall report, in accordance with the provisions of section 11-4a, to the Governor and the joint standing committees of the General Assembly having cognizance of matters relating to human services, public health and education concerning the source and amount of funds received by the Children’s Trust Fund and the manner in which such funds were administered and disbursed.”</p>

Response Summary

Total Started Survey:8
Total Finished Survey:8 (100%)

SUMMARY PAGE: EVALUATING COUNCIL'S ROLES AND RESPONSIBILITIES
QUESTIONS ARE SORTED BASED ON RATINGS AND % RESPONSE

1. PROVIDE ADVICE AND SUPPORT:	Mission critical – most fundamental reason for Council	100.0%
7. ADVOCATE PUBLIC POLICY	Mission critical – most fundamental reason for Council	75.0%
3. ENSURE ADEQUATE RESOURCES	Mission critical – most fundamental reason for Council	50.0%
2. ASSIST WITH SHORT AND LONG TERM ORGANIZATIONAL PLANNING	An important responsibility of the Council	87.5%
4. UNDERSTAND AND MONITOR PROGRAMS AND OUTCOMES	An important responsibility of the Council	75.0%
8. RECRUIT AND ORIENT NEW MEMBERS AND ASSESS COUNCIL PERFORMANCE	An important responsibility of the Council	50.0%
5. COMMUNITY ENGAGEMENT AND COMMUNICATION	An important responsibility of the Council	50.0%
6. REPORT TO GENERAL ASSEMBLY AND GOVERNOR	A secondary responsibility (nice idea for the Council but not important)	50.0%
9. OTHER TYPES OF SUPPORT	A secondary responsibility (nice idea for the Council but not important)	50.0%

1. PROVIDE ADVICE AND SUPPORT: Advisory Boards have the responsibility to plan, make decisions and act according to their role as advisor and supporter of the Trust Fund. This includes advising the Executive Director, Comissioners, Legislators and Governor with the appropriate strategic direction, initiatives and use of resources of the Trust Fund.

	answered question	8
	skipped question	0
	Response Percent	Response Count
3 - Mission critical - most fundamental reason for the Council	100.0%	8
2 - An important responsibility of the Council	0.0%	0
1 - A secondary responsibility (nice idea for the Council but not important)	0.0%	0
0 - Does not apply to OUR Council	0.0%	0

2. ASSIST WITH SHORT AND LONG-TERM ORGANIZATIONAL PLANNING - Actively participate with Commissioner and Staff in overall planning process and assist with implementing plan goals. Members of the Council should demonstrate knowledge about the Trust Fund's place in the community, trends in child abuse prevention, and a focus on short term outcomes and long term results.

	answered question	8
	skipped question	0
	Response Percent	Response Count
3 - Mission critical - most fundamental reason for the Council	12.5%	1
2 - An important responsibility of the Council	87.5%	7
1 - A secondary responsibility (nice idea for the Council but not important)	0.0%	0
0 - Does not apply to OUR Council	0.0%	0

3. ENSURE ADEQUATE RESOURCES - Council should work in partnership with Executive Director and development staff to raise funds from federal, state, and community sources so that organization has adequate resources to fulfill its mission.

	answered question	8
	skipped question	0
	Response Percent	Response Count
3 - Mission critical - most fundamental reason for the Council	50.0%	4
2 - An important responsibility of the Council	37.5%	3
1 - A secondary responsibility (nice idea for the Council but not important)	12.5%	1
0 - Does not apply to OUR Council	0.0%	0

4. UNDERSTAND AND MONITOR PROGRAMS AND OUTCOMES - Board members should have familiarity with Trust Fund's budget, programs and outcomes. The board's role in this area is to determine which programs are most consistent with the organization's mission and to monitor their effectiveness.

	answered question	8
	skipped question	0
	Response Percent	Response Count
3 - Mission critical - most fundamental reason for the Council	25.0%	2
2 - An important responsibility of the Council	75.0%	6
1 - A secondary responsibility (nice idea for the Council but not important)	0.0%	0
0 - Does not apply to OUR Council	0.0%	0

5. COMMUNITY ENGAGEMENT AND COMMUNICATION - An organization's board is often the organization's primary link to the community including the general public and media. Clearly articulating the organization's mission, accomplishments and goals to the public as well as garnering support from important members of the community is a key element of a comprehensive public relations strategy.

	answered question	8
	skipped question	0
	Response Percent	Response Count
3 - Mission critical - most fundamental reason for the Council	25.0%	2
2 - An important responsibility of the Council	50.0%	4
1 - A secondary responsibility (nice idea for the Council but not important)	25.0%	2
0 - Does not apply to OUR Council	0.0%	0

6. REPORT TO GENERAL ASSEMBLY AND GOVERNOR - With input from Executive Director, write annual reports, share program evaluations and pertinent outcomes to the General Assembly and/or committees with cognizance in matters related to human services, public health and children. Prepare annual reports concerning source of and amount of, and manner in which funds were distributed to General Assembly.

	answered question	8
	skipped question	0
	Response Percent	Response Count
3 - Mission critical - most fundamental reason for the Council	12.5%	1
2 - An important responsibility of the Council	37.5%	3
1 - A secondary responsibility (nice idea for the Council but not important)	50.0%	4
0 - Does not apply to OUR Council	0.0%	0

7. ADVOCATE PUBLIC POLICY - Provide information and resources to families, child advocates, lawmakers and concerned citizens on current issues of the Trust and relating to preventing child abuse. The advocacy role should monitor and protect children's best interests at the state, local and federal level.

	answered question	8
	skipped question	0
	Response Percent	Response Count
3 - Mission critical - most fundamental reason for the Council	75.0%	6
2 - An important responsibility of the Council	12.5%	1
1 - A secondary responsibility (nice idea for the Council but not important)	12.5%	1
0 - Does not apply to OUR Council	0.0%	0

8. RECRUIT AND ORIENT NEW MEMBERS AND ASSESS BOARD PERFORMANCE - all boards must attract and orient new members to their responsibilities and the organization's history, needs and challenges. By evaluating its performance in fulfilling responsibilities, the board can recognize achievements and reach consensus on needed areas of improvement.

	answered question	8
	skipped question	0
	Response Percent	Response Count
3 - Mission critical - most fundamental reason for the Council	50.0%	4
2 - An important responsibility of the Council	50.0%	4
1 - A secondary responsibility (nice idea for the Council but not important)	0.0%	0
0 - Does not apply to OUR Council	0.0%	0

9. OTHER TYPES OF SUPPORT - Other ways advisory council support Trust Funds include: Providing pro-bono work to assist staff with special projects, implement program goals, contribute funds, provide entry to influentials, engage high-profile name as honorary chair, serve as community knowledge link or speakers bureau.

	answered question	8
	skipped question	0
	Response Percent	Response Count
3 - Mission critical - most fundamental reason for the Council	0.0%	0
2 - An important responsibility of the Council	50.0%	4
1 - A secondary responsibility (nice idea for the Council but not important)	50.0%	4
0 - Does not apply to OUR Council	0.0%	0

10. PLEASE PROVIDE YOUR NAME AND IDEAS YOU MIGHT HAVE ON HOW TO BEST FULFILL ANY OF THE BOARD'S RESPONSIBILITIES.

answered question

4

skipped question

4

My answers to questions 6 and 7 were "secondary...Nice.. but not important." However, I believe these are both important functions but should be the responsibility of the staff or the Executive Director. #6, report to Gen'l Assy, its essential this be done every year, but report should be PREPARED by the staff and ED and chair and APPROVED by the board. The board can assist in advocacy but it' is important to speak with one voice, normally the ED or the chair. Going forward, I think the board should approve a short range and a long range plan for presentation to the Commissioner of DSS and ultimately to the Legislature.

6 I do not think the Council should "write" or "prepare" annual reports, but members should advise and/or assist.

#8 is very important – without an engaged and fully filled council, we do not exist as a strong entity. The Council is at risk of being irrelevant if we don't engage and use our voice.

These are all important responsibilities of the Council. That is why I was pretty flat in my ratings. The key is having skill and perspective diversity among members, so you can accomplish them all.

Overview of Children's Trust Funds

There are 52 Trusts within the United States, all created by state (or U.S. Territory and the District of Columbia) statute to prevent child abuse and neglect. After that similarity, the differences are of most interest.

Revenues

The annual budgets in 2006 ranged from \$80,000 in West Virginia to \$14 million in Massachusetts. The average annual budget in 2006 was \$1,988,000 and the mode was \$1,000,000. Major funding sources are endowments, annual state allocations, Federal CBCAP monies and sometimes private funding. Thirty states' Children's Trusts receive CBCAP funds; 19 of those are lead agency contacts (meaning they distribute these funds within their state.) Endowments range from \$750,000 to \$22,000,000; however, over 30 of the Trusts have no endowment at all. Other common funding sources are birth and marriage license and divorce fees, state income tax check-off donations, fundraising and special license plate fees. Less common are tobacco fund dollars, US Office of Juvenile Justice and Delinquency Prevention dollars, oil pipeline dollars, general revenue or state appropriations, US Adoption and Safe Families Act funds, TANF funds, one state's educational trust fund, Maternal and Infant Health dollars, and duplicate birth certificate, heirloom marriage and birth certificate fees. Two major national foundations in this field are the Doris Duke Charitable Foundation and the Annie E. Casey Foundation.

Structures

Children's Trusts are situated within more than a dozen different state departments ranging from the obvious departments of health/social/human services, to the unexpected department of economic security. Many are within the states' department that deals with child welfare, five are standalone agencies within the state, four are merely funding streams for a state agency, and twelve are an independent 501(c)(3) or have a sister public charity or are a public/private hybrid. Two are part of the Governor's office and one is managed by the Attorney General. While still heavily state managed, there is a significant conversation towards privatizing within the Trust community due to challenges from either a new Governor, change in state department leadership, the departure of key Trust Fund staff person, or significant cutbacks in funding for the work.

Staff Size

The number of staff ranges from no dedicated staff (that usually means a department provides some level of administrative support) to 18 FTEs (Alabama). The average staff size was 3.3 FTE. Several contract for staff outside the sponsoring state agency.

Governance

All of the Trusts, whether private, public or quasi, have boards. All public or quasi have Trustees appointed by either the Governor or the legislature. Private Trusts commonly do as well. Most states trustees are appointed by the Governor although governor appointees can be political and ever changing. Trustees usually are a combination of child abuse and neglect prevention experts, state

agency heads, community and business leader and representatives of philanthropy. Those Trusts that have privatized tend to have larger boards because of their additional fundraising and advocacy responsibilities.

Prevent Child Abuse America Chapters

Eleven Children's Trust Funds are also the Prevent Child Abuse America Chapter within their state (Alabama, Idaho, Indiana, Hawaii, Massachusetts, Michigan, Maine, New Hampshire, Oregon, Washington State, and Wisconsin). This allows for easy access to nationally funded and developed materials on prevention education, research programs, and advocacy as well as technical assistance in the form of direct chapter support and an annual conference. In Connecticut, the PCA chapter is a grantee of the Children's Trust Fund.

Programming

All Children's Trust Funds offer grants to organizations that work in the child abuse and neglect arena. However, more Trusts are beginning to find that their grantmaking activities are taking up a minority percentage of their programming activities. This is due to a growing realization that even the best funded Trusts have few resources to throw at as large a problem as preventing statewide child abuse and neglect. This realization has been coupled with an increasing belief that focusing on playing a key role in convening funding research, collaborating, and education both of the public and state elected officials, may be a more effective role for Children's Trusts. Among other activities undertaken by Children's Trusts are:

- Grantmaking
- Social Marketing Campaigns
- Providing technical assistance to grantees
- Exercising leadership roles in coalitions and networking
- Representing the state on child abuse and neglect issues within other government bodies and agencies
- Distributing funding to the local levels through county or regional organizations or councils
- Offering trainings/workshops/conferences for prevention services
- Providing home visitation or parent education
- Influencing policy and legislation
- Evaluating practice in the field/providing standardize outcome measurement

Alaska

Privatized as a 501(c)(3) non-profit

Initially formed in Alaska in the 1988, the Alaska Children's Trust (ACT) was established as an endowment fund with the goal of preventing child abuse and neglect. The ACT had limited powers and was an initiative under the Department of Health and Human Services. The fund was just privatized and moved out of the State control.

FACT 501(c)(3) was created to allow for greater Fundraising, Public Awareness and Advocacy. The relationship between ACT and FACT varied depending on the Administration's goals and culture. Unhappiness with bureaucracy and lack of progress on initiatives drove the trustees of both organizations to work together on a strategic planning initiative that took a hard look at the Trust Fund organization and structure in Alaska.

FACT was awarded a \$50,000 grant for Doris Duke Charitable foundation to help implement the transition plan. In addition, a local foundation matched this grant.

The **Alaska Children's Trust (ACT)** has just restructured and merged into the supporting non-profit organization Friends of the Alaska Children's Trust (FACT.)

The Alaska Children's Trust has an endowment fund of more than \$12 million. The fund principal grows, while approximately \$500,000 of interest income was allocated towards state initiatives. Until this year, the fund was managed by the State of Alaska Department of Revenue Services. Seven Trustees, appointed by the Governor oversaw the fiduciary and grant-making functions of the Trust. The fund is now fiscally managed by the **Alaska Community Foundation** and governed by the new ACT governing board.

Historically, the budget also included \$80,000 a year raised by FACT from private contributions and \$50,000 from state revenue from license plates and birth certificates.

ACT funded Strengthening Families, an initiative involving early childhood centers. A grant from the Federal Office of Juvenile Justice and Delinquency Prevention funds a social marketing campaign. CBCAP grants have historically gone to the Office of Children's Services and NOT to ACT or FACT.

Governing Board: The new 13 member board of ACT is a composed of both prior FACT and ACT Trustees and includes state commissioners, representative of the Governor's office, and individuals nominated by the board to serve a term of 4 years.

Most of the board members remain and were involved in the three year strategic process facilitated **The Giving Practice** consulting organization. The trustees of ACT and FACT worked together on this strategic plan.

ACT currently employs just one staff member – the newly hired Executive Director. ACT enjoys a collaborative agreement of with the **Foraker Group** a non-profit consulting company that provides assistance in fundraising, planned giving, finance and technology. The Executive Director of the newly formed ACT is an employee of the Foraker Group.

A detailed transition plan is being executed at this time which will work to build capacity for stronger advocacy, grantwriting, annual fundraising, and public relations. The plan is also to take a hard look at programs of the Trust Fund to determine where and how resource allocation can be made in a more strategic and outcome based manner.

Massachusetts

Independent State Agency with a Friends 501(c)(3)

One of the biggest strengths of the board has been its Marketing Role. Because of its size and prominent members, the board is well known and respected. The board works with the media to raise public awareness about the availability and importance of family support programs. The board has successfully engaged corporations to underwrite media campaigns. Additionally, Onetoughjob.org is a marketing campaign and website aimed at helping parents and is a 2010 National Parenting Publication Award (NAPPA) winner.

Friends of Children's Trust Fund enables CTF to expand and initiate much-needed programs that otherwise would not reach the families of Massachusetts. Friends raises approximately \$2 Million annually through Annual Gala and Auction, Fatherhood Golf Classic, Step up for Prevention/Boston Bruins Event, corporate, foundation and individual giving.

The **Massachusetts Trust Fund** is within the Executive Office of Education – Department of Early Education and Care for administrative purposes only. Annual Budget approximately \$14 million (\$10.2 million state appropriation, foundation grants, \$2 million corporate donations and fundraisers, \$2 million CBCAP).

Governing Board: The Trust Fund is overseen by a large board called the Child Abuse Prevention Board which includes up to 50 members:

- 10 ex-officio members – Commissioners or designees,
- 12 Governor appointed individuals who meet specified criteria (pediatrician, parent, child psychologist, etc.)
- Between 3 and 28 additional members appointed by the governor from board nominations.

The board has full authority including hiring of staff, grantmaking, advocacy, advising state agencies, and other procedures they deem necessary. Members of the board serve a term of three years but are eligible for reappointment. The Board meets four times annually. Standing Committees meet as needed and include: Governance/Nominating Committee, Program Committee, Executive Committee, and Marketing Committee.

The Children's Trust Fund has a strong partnership with **Massachusetts Citizens for Children (MCC)** whose mission is advocacy for prevention of Child Abuse and Neglect. MCC is the **Prevent Child Abuse America chapter** focusing on **Shaken Baby Syndrome Prevention**. It is lead agency for the **Massachusetts Child Sexual Abuse Prevention Partnership** and staffs the **Enough Abuse Campaign** - a statewide public engagement initiative to educate and mobilize parents, professionals and communities to prevent child sexual abuse. MCC also serves as the Massachusetts member of **Voices for America's Children**.

Friends of the Trust Fund: Established in 1991 as a tax-exempt 501(c)(3) organization, the sole mission of Friends of Children's Trust Fund is to provide funding and support to CTF for the prevention of child abuse and neglect. Friends raise about \$500,000 and recently began a permanent endowment with \$700,000.

The Children's Trust Fund is the umbrella organization. Friends reports to the Board of Directors of the Trust Fund. The Board of Friends is comprised of 10-15 members including a Development Director and the Executive Director of the Trust Fund. Committees of the Friends include: Development, Special Events, Individual/Major Donor, and Young Professionals Preventing Child Abuse (YPPCA).

South Carolina

Established 501(c)(3) non-profit

In 2008, to eliminate duplication of programs and to fortify sustainability for initiatives supporting children and families, Children's Trust of South Carolina became the state's designated 501(c)(3) organization for the prevention of child abuse, neglect and unintentional injuries. This was the result of a merger between Prevent Child Abuse South Carolina, Voices for South Carolina's Children, Children's Trust Fund of South Carolina and Safe Kids South Carolina. The merger of these four nonprofit organizations has been a monumental accomplishment

The Children's Trust was established originally by the SC legislature as an independent 501(c)(3) in 1984. Annual Budget is approximately \$5.2 million (\$3.4 million federal grants, \$100,000 from state appropriations, \$800,000 in state contracts with DSS and the Health Department and \$320,000 from corporate and private contributions)

The Children's Trust is also a state funded commission within the Governor's office. The commission is essentially the administrative pass-through to create the required public/private partnership to receive an annual general fund match for the CBCAP grant. The commission provides a complete report of the activities of the trust fund annually to the General Assembly.

Children's Trust Foundation: The Board of Directors is composed of 17 members appointed by the Governor, ten at large from the State are nominees of the Board of Directors of the Children's Trust, plus one is legislatively nominated from each of the state's congressional districts. Members serve four year terms.

Standing committees of the Board are: Governance, Finance/Audit, Human Resources, Communications and Grant/Programs. Several advisory committees exist including Public Policy, KidsCount and SafeKids. Staff members include Executive Director, Development Director, Special Events/Projects, Director of Operations/CBCAP, CFO, fiscal staff, Advocacy Director, Communications Director, Graphic Designer, Prevention Outreach coordinator and a SafeKids director.

The Foundation has a strong volunteer component. Volunteers can sign up to serve the following capacities:

- Citizen Review Panel for the CBCAP grants
- Communications
- Development
- Picasso Project and Gala
- Prevention Conference
- Public Policy
- Safe Kids Advisory

The merger with Voices for Children has significantly increased the advocacy capacity and capabilities of the Foundation. A public policy/legislative agenda is brought forth each year. The Executive Director and others testify regularly. Expenditures for lobbying use Section 501(h) of the tax code.

Washington

Structure within a State Agency. A separate 501(c)(3) exists but is no longer connected.

The Washington legislature provided a year for the Trust Fund to work through a well thought out transition plan before the Trust Fund was transferred to the Department of Early Learning.

Grants from the Foundation provide education, technical support, and direct funding to community-based organizations in 13 Washington counties so that parents and families can become the parents they want to be. Strengthening Families Washington has received grants in the past but is currently not receiving grants. The current focus is to provide funding for parent education and support before a crises hits.

The Washington Council for Children and Families (CCF) recently transitioned from a stand-alone agency to the Department of Early Learning (DEL) and is now known as the initiative **Strengthening Families Washington**. The Children's Trust Fund is a separate fund in the state treasury set up to accept private and public contributions and earn interest income. The annual budget has significantly reduced and is approximately \$650,000 (\$530,000 from the Federal CBCAP grant, \$80,000 from the Children's Trust Fund, \$40,000 from license plate and birth certificates.)

Strengthening Families Washington: The transition statutorily eliminated the Board of Directors and instead is working towards forming a new advisory body. The Advisory body is asked to:

- Keep a focus on/advocate for prevention
- Maintain a community/stakeholder voice and influence
- Support and identify fund development opportunities
- Ensure accountability for Trust Fund dollars
- Participate in strategic planning for prevention initiatives
- Make recommendations to Commissioner on effective use of funds and strategic opportunities to advance mission

The largest resource allocation for Strengthening Families Washington follows a national 0-3 Strengthening Families model intended to provide family support and bolster five protective factors that promote healthy families.

Children's Trust Foundation: An entirely separate 501(c)(3) established in 1984. In their first ten years, the goal of the foundation was to fundraise for the Children's Trust Fund. In 1992, Children's Trust Foundation and CCF developed a statewide plan for prevention. This plan was used to prioritize grant allocation towards family support centers and other prevention efforts.

In 2007, a Seattle Foundation grant and two generous donations from a local family foundation and an estate created a permanent endowment of \$1 million and positioned the Children's Trust as a leader in the effort to prevent child abuse and neglect in Washington.

The board includes 9 members who participate in one of the following standing committees: Advancement, Finance, Marketing, and Program. Past Presidents and significant numbers of volunteers also participate in these committees. An Executive Director and Development Director support the Foundation.

Wisconsin

Independent State Agency Structure within a State Agency. A 501(c)(3) exists and is connected.

The board has moved to an investment strategy that supports Family Resource Center Networks (FRCN). FRCN initiate Community Response programs, working with families who are reported to child protection and screened out. They also fund child sexual abuse prevention, respite care, research, social marketing (currently around the Adverse Childhood Experience work) and research. Most recently they established a \$250,000 Social Innovation Fund to support emerging work. The Trust Fund does NOT support Home Visiting which is the responsibility of the Dept. of Children and Families.

The Trust Fund is also applying for a 501(c)3 status to capture local foundation grants for child abuse prevention. The Foundation focus is on large national foundations.

The longer-term vision is to support and sustain a high quality early care and education system funded by a private/public partnership that includes financial resources from the federal, state and private sectors administered through the Foundation.

The ***Wisconsin Trust Fund*** is an independent state agency (within the Department of Children and Families for administrative purposes only). Annual Budget is approximately \$1.4 million (\$900 thousand state appropriation, \$450 thousand CBCAP, \$50 thousand individual giving, foundation, license plate and other revenue sources).

Governing Board: The Trust Fund is overseen by a Board called the Child Abuse Prevention Board of 20 members:

- A representative from the Governor's Office,
- 4 legislators appointed by the minority and majority leaders (who act as champions for legislative agenda),
- 5 ex-officio members – Commissioners of state agencies or designees (Human Services, Children and Families, Justice, Education and Health),
- 10 Governor appointed citizens –nominated by Board based on interest, leadership ability and expertise on child abuse prevention and do not need to meet specific criteria

Members of the board serve a term of three years. The Board meets six times annually. The primary duty of the board is to advise the governor, legislator, and other state agencies on policy issues, support statewide initiatives, public education and to identify criteria for grant applications and review, approve (or disprove) grant applications. No standing advocacy committee or public education/awareness committee exists.

Celebrate Children Foundation: Established as a tax-exempt 501(c)(3) organization, the mission started as a means to provide funding and support to CTF for the prevention of child abuse and neglect. The mission has expanded to provide advocacy and funding for “early childhood learning systems.”

The Foundation has a \$1.5 million endowment, supported by a growth of \$100,000 annually through sale of special license plates. A newly established a purchasing consortium that offers discounts to child care centers across the state has a goal of raising an additional \$100,000 annually. Interest from the endowment principal is supplemented by grantwriting and individual giving.

The Children's Trust Fund and the Foundation are separate but connected. The Foundation board has 9 members – 4 of which also sit on the Child Abuse Prevention Board. The Executive Director of the Trust Fund is also the President of the Foundation. The Foundation employs an Executive VP and a Development Director. In-kind support comes from the Trust Fund Financial specialist.

For the Future – CTFC Strategic Planning

PREFACE

The CTF Council has a history of success. Now in its second decade of operations, thanks to the support of the council, the Trust Fund has a substantial record of achievement. The Trust Fund has consistently coordinated statewide efforts to prevent child abuse and neglect and ensure the positive growth and development of children. The Trust Fund invests in several major evidence based initiatives that help to support and strengthen families – especially those families for whom the risk of abuse and neglect is very real. Today, Trust Fund programs reach more than 15,000 families every year.

While Trust Fund efforts to prevent child abuse and neglect have made significant strides over the past decade, the past three years have brought about new challenges. The state budget crises, the merger of the Trust Fund into the Department of Social Services, a change in the statutory role of the Council, staff downsizing, the launch of new initiatives, acquisitions of new programs and deletions or transfer of some existing programs have all worked to reconfigure the Trust Fund.

When the Trust Fund was established as an independent agency in 1997, the Council was set up as the governing entity of the Trust Fund. Today, with the merger into the Department of Social Services, this has changed. Although the Council maintains some independent authority for fundraising, advocacy and for decisions impacting NFN, in most matters, the Council is now an advisory body. Under the new statute the Council’s main role is to provide advice and guidance to the Commissioner, the Governor, and the Legislators on matters of cognizance.

Today, the issue before the Council is whether the Council’s mission, structure, organization, and governance are still right for the Trust Fund. Analyzing this question raised, in turn, more questions about the best way for the council to accomplish its primary roles and responsibilities as defined by the recent Council survey:

- Provide Advice and Support
- Advocate Public Policy
- Ensure Adequate Resources

To help the Council think about options for the future, some key issues that have surfaced are highlighted and analyzed briefly.

It is our hope that this issues paper will spark a lively discussion and help set Council direction on how to handle these issues.

DISCUSSION OF THE ISSUES

Issue 1 Is the mission of the Council still appropriate?

Analysis: The Council was initially set up as a decision-making body with authority over the Trust Fund. Council responsibilities included source and usage of funds and determining, monitoring and strengthening the organization’s programs and services. Now that the Trust Fund is a more mature, fully established organization and with the statutory change to the Council, the Council often finds itself simply ratifying existing decisions of the Trust Fund – rather than direction setting. Indisputably, the Council has played a strong, essential role in advocacy. With the recent budget crises, the Trust Fund might not have continued to exist were it not for the strong advocacy leadership of the Council.

The mission of the Trust Fund has been clearly defined “to prevent child abuse and neglect and to establish resources in communities statewide that support and strengthen families.” One suggestion is that the Council might become more relevant if it were to expand its mission to include prevention of Adverse Child Experiences (ACES.) Both Washington state and Wisconsin are leading the effort towards more integrated human services systems recognizing that not just child abuse but a host of traumatic experiences can harm a child’s outcome and in turn cause expensive health and social problems.

Issue 2 How can the CTF Council best fulfill its responsibility of providing advice and support to the Commissioner of DSS?

Analysis: While we applaud and appreciate the support of Commissioner Bremby towards the programs and mission of the Trust Fund, the Council’s relationship with the Commissioner is ad hoc in nature – meeting as the need arises. The Council feels it is important to systematize the relationship between the Council and the Commissioner now so that roles, responsibilities, decision making and communications about the Trust Fund are clear and productive. The benefit to laying this foundation is to ensure that the Trust Fund will be provided and equally high level of attention even if future administrative changes were to occur.

Issue 3 What is the best way for the CTF Council to ensure adequate resources for the Children’s Trust Fund?

Analysis: Historically approximately 91% of the Trust Fund’s budget came from State funds, 5% from Federal grants and the remainder from private sources. With the new federal home visiting grant, the federal share of the Trust Fund budget will rise to roughly 25%.

The enabling statute of the Trust Fund stipulates that gifts and grants from private donors can be solicited and accepted by the Council and the Commissioner to be used for the prevention of child abuse and neglect and family resource programs. From 2005 through 2008, private funds from individuals and foundations raised on an annual basis (and expended on an annual basis) were about 3% of the budget. An additional \$500,000 was accumulated from 1997 to 2008 raised from a number of sources. \$250,000 of this has been allocated to the new Triple P initiative.

In several other states, a sister 501(c)(3) public charity allows for leveraging private funds and broader community involvement. In states, where this exists, several actions have made this work well for them – 1) the Trust and Public Charity, while legally separate, are run by combined staff and see their goals as the same. 2) The governing board is large (allowing for wide out of state expertise and willing volunteers to work on private fundraising efforts). For example the Trust Fund Board in Massachusetts was increased to “up to 50” by statute. In some states, like Washington, where the Trust Fund and Charity are truly separate – the organizations view themselves as competing for child abuse prevention funding and what was originally set up as a “Friend” organization is no longer so friendly.

Other states have successfully raised private funds through the state entity without the existence of a sister public charity. In these states, the success of fundraising is attributed to a full or part-time development director dedicated to fundraising efforts. Most of these states rely on private donations to support their budget and do not have such generous state or federal allocations as Connecticut.

Issue 4 How can the Council best fulfill its role as advocating for public policy in support of child abuse prevention?

Analysis: From 1997 to 2008, the Trust Fund and the Council were one entity. As a state council, we had influence and access to policy makers – not only legislators, but also agency leads. Staff of the Trust Fund worked in collaboration with and educated the legislature and other state agencies about anything that may affect the Trust Fund’s work. Legislative briefings or reports to subcommittees of cognizance led to strong legislative relationships that helped prevent budget reductions to the Trust Fund by new administrations.

With the merger of the Trust Fund into DSS, the Council and the Trust Fund are now separate entities. Staff of the Trust Fund can no longer have the face-to-face legislative relationships that can be so useful at a policy level. The Council as an advisory body can advocate on behalf of the Trust Fund. However, over 30 percent of the Council is comprised of employees of the state and as such it is not appropriate for these members to lobby on behalf of the Trust Fund. The remaining Council members who are volunteers do not have the time or resources to maintain the past level of advocacy supported by Trust Fund staff. The Council success in lobbying on behalf of the Trust Fund is largely due to a strong state-wide network of providers who have directly lobbied legislators to preserve programs of the Trust Fund during the state budget crises.

In other states, it is often a third party that undertakes the role of Trust Fund advocacy. In Washington State an independent non-profit organization, the Children’s Alliance has an impressive advocacy track record with state legislature. In Massachusetts, the Trust Fund has a strong partnership with Massachusetts Citizens for Children whose mission is advocacy for prevention of Child Abuse and Neglect. In South Carolina, the Trust Fund recently merged with Voices for Children and the Prevent Child Abuse South Carolina Chapter.

Appendices



On June 19th, 2012 a workgroup of the CTF Advisory Council met to prepare for the Advisory Council's fall strategic planning meeting. The group shared their thoughts on several topic areas to create an understanding of the "here and now", a sense of direction, what information would be helpful / necessary to guide the Advisory Council and action steps to be taken over the summer.

Laura and Karen provided a context for the Advisory Council by providing the history, recent changes and linking the richness of the Council's past to the foundation for its future. The group then addressed the following:

- **Purpose and Aim: *Participants shared their views on the purpose and aim of the Advisory Council***

"We should be unable to look into the eyes of any child and not see our own"

Direction

Set priorities

Carries the mission and the cause

Reframing to children's optimal health and Development

Fundraising

Supporting the work of the CTF

Private fund Raising

Supporting the Activities of the CTF

Advocacy and Education

Subject expertise

Networking: clarifying what the CTF is ~ a lead in the state to protect children

Moving CTF agenda forward

Bringing different perspectives to the table that has the potential to shape policy

Insure the accountability of the CTF

Communicating, Coordinating, Leveraging and Leading

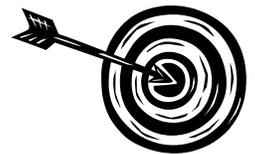
Sharing information

Making connections across silos

Getting private sources of funding

Acting as the voice in child abuse prevention

Bringing experience, knowledge and networking to the table



- **Strengths: *Participants identified the strengths of the Advisory Council***

Expertise~ range of experience and knowledge of Advisory Council Members

Relevance

Focus on mission vs. egos

Individual and group efforts



Willingness to take action for the cause
 An important message that when communicated, inspires others to join in
 Leadership of Karen and Laura
 Passion
 Work ethic
 Knowledge
 Grace
 Courtesy
 Clear communication
 Persistence
 Resilience
 Strategic sense
 Relevance
 Forward motion
 Bringing work to life

- **Sustainability:** Are we structured for success to do what we aim for?

The group offered the following questions for consideration as they prepare for the future....



What are the priorities?

How do we settle into this structure?

What can I do? Are there ways I can contribute but not be in conflict?

What does the Council's relationship with DSS & the Commissioner look like? How will it work if we are advisors and not a board of directors?

What is an advisory role? What is the Council's role as advisors?

How can we show success of efforts in an advisory capacity?

How can we operationalize recommendations both with the CTF and others?

Can the Advisory Council be a catalyst for dialogues about prevention with others?

- **What are the most pressing needs? What do we need to know?**

Understand the statutes

What is required?

What is allowed?

What has changed?

Learn what are

Identify areas where resources

Develop a commissioner



other states Trust Funds doing with their advisory councils we can think outside of the box and commit time, in kind

framework for a conversation / relationship with the now and for the future.



- **Next Steps**

What are the areas of action that ideally should take place in order to maximize the Fall Strategic Planning?

- Get information on Friends of the Trust Fund (Advisory Council roles) from other states
 - Prepare a list of questions to be asked of these groups in order to gather consistent information
 - Look at their experiences / considerations / advantages / disadvantages
 - Do a comparison of the above information
- Insure that we are using common language, expectations, experiences when we are discussing the Advisory Council, the CTF, etc.
- Update Statutes so that changes from Board of Directors to Advisory Council can be more clearly seen
- Meet with the Advisory Council in late summer to do an Advisory Council 101 to orient everyone (newer and experienced members)
- Get individualized input from everyone (homework over the summer)
- Meet with the commissioner
- Consider inviting a few thoughtful individuals to join the Fall planning meeting who can speak to prevention , understand the role of the CTF and Advisory Council and can provide valuable input towards shaping the future

STATE STATUTE CONCERNING THE CHILDREN'S TRUST FUND AND THE TRUST FUND COUNCIL

As of 2009

Sec. 17b-751. (Formerly Sec. 17a-50). Children's Trust Fund established. Regulations. Children's Trust Fund Council. Report.

(a) There is established a Children's Trust Fund, the resources of which shall be used by the council established pursuant to subsection (b) of this section and the Commissioner of Social Services with the advice of the Children's Trust Fund Council to fund programs aimed at preventing child abuse and neglect and family resource programs. Said fund is intended to be in addition to those resources that would otherwise be appropriated by the state for programs aimed at preventing child abuse and neglect and family resource programs. The Children's Trust Fund Council and the commissioner may apply for and accept any federal funds which are available for a Children's Trust Fund and shall administer such funds in the manner required by federal law. The fund shall receive money from grants and gifts made pursuant to section 17a-18. The Children's Trust Fund Council and the commissioner may solicit and accept funds, on behalf of the Children's Trust Fund, to be used for the prevention of child abuse and neglect and family resource programs. The Commissioner of Social Services, with the advice of the Children's Trust Fund Council, shall adopt regulations, in accordance with the provisions of chapter 54, to administer the fund and to set eligibility requirements for programs seeking funding. Youth service bureaus may receive funds from the Children's Trust Fund.

(b) There shall be established, within existing resources, a Children's Trust Fund Council which shall be within the Department of Social Services. The council shall be composed of sixteen members as follows: (1) The Commissioners of Social Services, Education, Children and Families and Public Health, or their designees; (2) a representative of the business community with experience in fund-raising, appointed by the president pro tempore of the Senate; (3) a representative of the business community with experience in fund-raising, appointed by the speaker of the House of Representatives; (4) a representative of the business community with experience in fund-raising, appointed by the minority leader of the House of Representatives; (5) a representative of the business community with experience in fund-raising, appointed by the minority leader of the Senate; (6) a parent, appointed by the majority leader of the House of Representatives; (7) a parent, appointed by the majority leader of the Senate; (8) a parent, appointed by the president pro tempore of the Senate; (9) a person with expertise in child abuse prevention, appointed by the speaker of the House of Representatives; (10) a person with expertise in child abuse prevention, appointed by the minority leader of the House of Representatives; (11) a staff member of a child abuse prevention program, appointed by the minority leader of the Senate; (12) a staff member of a child abuse prevention program, appointed by the majority leader of the House of Representatives; and (13) a pediatrician, appointed by the majority leader of the Senate. The council shall solicit and accept funds, on behalf of the Children's Trust Fund, to be used for the prevention of child abuse and neglect and family resource programs, and shall make grants to programs pursuant to subsection (a) of this section.

(c) On or before July 1, 2010, and annually thereafter, the Children's Trust Fund Council and the commissioner shall report, in accordance with the provisions of section 11-4a, to the Governor and the joint standing committees of the General Assembly having cognizance of matters relating to human services, public health and education concerning the source and amount of funds received by the Children's Trust Fund, and the manner in which such funds were administered and disbursed.

Sec. 17b-751a. (Formerly Sec. 17a-50a). Eligibility for grants under the Kinship Fund and Grandparents and Relative Respite Fund. A grandparent or other relative caregiver who is appointed a guardian of a child or children through the Superior Court and who is not a recipient of subsidized guardianship subsidies under section 17a-126 or foster care payments from the Department of Children and Families shall, within available appropriations, be eligible to apply for grants under the Kinship Fund and Grandparents and Relatives Respite Fund administered by the Children's Trust Fund Council and the Department of Social Services through the Probate Court.

Sec. 17b-751b. (Formerly Sec. 17a-56). Nurturing Families Network.

(a) The Children's Trust Fund Council shall establish the structure for a state-wide system for a Nurturing Families Network, which demonstrates the benefits of preventive services by significantly reducing the abuse and neglect of infants and by enhancing parent-child relationships through hospital-based assessment with home outreach follow-up on infants and their families within families identified as high risk.

(b) The Children's Trust Fund Council shall: (1) Develop the comprehensive risk assessment to be used by the Nurturing Families Network's providers; (2) develop the training program, standards, and protocols for the pilot programs; and (3) develop, issue and evaluate requests for proposals to procure the services required by this section. In evaluating the proposals, the Children's Trust Fund Council shall take into consideration the most effective and consistent service delivery system allowing for the continuation of current public and private programs.

(c) The Children's Trust Fund Council shall establish a data system to enable the programs to document the following information in a standard manner: (1) The level of screening and assessment; (2) profiles of risk and family demographics; (3) the incidence of child abuse and neglect; (4) rates of child development; and (5) any other information the Children's Trust Fund Council deems appropriate.

(d) The Children's Trust Fund Council shall report to the General Assembly, in accordance with the provisions of section 11-4a, on the establishment, implementation and progress of the Nurturing Families Network, on January first and July first, of each year.

Sec. 17b-751d. Department of Social Services designated as state agency responsible for programs and activities to prevent child abuse and neglect. Report.

(a) The Department of Social Services shall be the lead state agency for community-based, prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect, in collaboration with the Children's Trust Fund Council, established pursuant to section 17b-751. The responsibilities of the department shall include, but not be limited to, collaborating with state agencies, hospitals, clinics, schools and community service organizations, with the guidance of the Children's Trust Fund Council, established pursuant to section 17b-751, to: (1) Initiate programs to support families at risk for child abuse or neglect; (2) assist organizations to recognize child abuse and neglect; (3) encourage community safety; (4) increase broad-based efforts to prevent child abuse and neglect; (5) create a network of agencies to advance child abuse and neglect prevention; and (6) increase public awareness of child abuse and neglect issues. The department, with the guidance of the Children's Trust Fund Council and subject to available state, federal and private funding, shall be responsible for implementing and maintaining programs and services, including, but not limited to: (A) The Nurturing Families Network, established pursuant to subsection (a) of section 17b-751b; (B) Family Empowerment Initiative programs; (C) Help Me Grow; (D) the Kinship Fund and Grandparent's Respite Fund; (E) Family School Connection; (F) support services for residents of a respite group home for girls; (G) legal services on behalf of indigent children; (H) volunteer services; (I) family development training;

(J) shaken baby syndrome prevention; and (K) child sexual abuse prevention.

(b) Not later than sixty days after October 5, 2009, the Commissioner of Social Services shall report, in accordance with section 11-4a, to the joint standing committees of the General Assembly, having cognizance of matters relating to human services and appropriations and the budgets of state agencies on the integration of the duties described in subsection (a) of this section into the department.

Sec. 17b-751e. Continuance of Children's Trust Fund Council's orders, regulations and contracts. Any order, regulation or contract of the Children's Trust Fund Council agency that is in force on September 1, 2009, shall continue in force and effect as an order, regulation or contract of the Department of Social Services until amended, repealed or superseded pursuant to law.

Meeting with Commissioner

Background:

There is a tension between treatment and prevention programs at the state level. The state's major responsibility is to offer treatment to citizens. The Children's Trust Fund is attempting to prevent the need for that treatment. In times of limited or declining state resources, the choice of OPM and the administration has been to eliminate or reduce prevention. However, the effectiveness of prevention programs is gaining converts among the state legislature. Preventing child abuse and neglect is proven to save dollars over the long run, as well as save human and social capital. It takes forward thinking leadership to recognize that investing in prevention is as important as investing in treatment. We applaud and appreciate the support of Commissioner Bremby of the Children's Trust but.....

Purpose:

The Council feels it is important to systematize the relationship between the Council and the Commissioner now so that the roles, responsibilities, decision making and communications about the Trust Fund are clear and productive. The benefit to laying this foundation is to ensure that the Trust Fund will be provided an equally high level of attention even if future administrative changes were to occur.

Recommendations:

- 1) Commitment to a more sustainable relationship between the Council and Department of Social Services that includes regular meetings and agendas rather than ad hoc emails/meetings. The purpose of these meetings, issues and matters to be addressed should be identified.
- 2) Create a precedent for the Council's statutory role in annually providing input and negotiating budgetary decisions related to the Trust Fund and its programs. Council should develop a proposal for how this will work. DSS just transferred \$90,000 in CBCAP funds to the strategic planning division for fatherhood initiatives without consulting the Council. Is this ok? It might be but shouldn't the Council be involved in decision making.
- 3) Clarity from Commissioner on Executive Director's role within DSS and as support of Council: i.e. Define Executive Director's ability to undertake legislative education and visibility in advocacy efforts that are not counter to the Administration's budgetary decisions. Can the Executive Director take on projects raised by Council – how is this decided. Can and should the Council play a role in selecting Executive Director if and when needed?
- 4) Negotiate best use of Council for supporting of NFN. According to statute, the Council has expanded authority for Nurturing Families Network. What makes sense given the new structure?
- 5) Acknowledgement of Council operational requirements – meeting space, uploads on ct.gov, staff support, and expense reimbursement. Lauren has \$5,000 in expenses to cover meals, travel and misc. – is this the council's petty cash for meetings? It would be helpful to discuss what the Council wants and needs.
- 6) Ongoing work together to improve capacity of Council to solicit funds on behalf of the Trust Fund to further existing programs and new endeavors.

The Connecticut Children's Trust Fund Council

Looking Beyond the Horizon

Now in its second decade, the Connecticut Children's Trust Fund has a substantial record of achievement, intimately supported by the Children's Trust Fund Council. This year, the Council is performing an extensive review of its structure, governance, and relationship to fund raising, advocacy and support for the Trust Fund. Every aspect of the Council is open for discussion.

The Council is interested in communicating with Trust Funds in other states to learn best practices.

The following list of questions is meant merely to initiate discussion, not to be strictly followed.

Thank you for participating in our strategic planning process.

Organizational Structure

Does your state have a Board/Council? What is the organizational structure of the Board/Council – Are you a Public entity, a quasi- Public or private organization? If you are private – are you a 501c3? Why was this organizational structure selected? Have there been any recent changes to your structure? What are the pros and cons of this structure? Is your board organization effective? Would you be willing to share your statutory authorization, by-laws or articles of incorporation?

How many members are on the Board/Council? What is the composition of the Board/Council members? How are members appointed to the Board/Council? Are they appointed by nominating committee or legislatively or through executive government. Does the Board/Council have a say in who is appointed? Are there term limits? Do you have officer terms and rotation of members? Is there a significant source of non-member representation on the board through young executive group, alumni group or special gala/fundraising subcommittee groups?

Do you have formalized committees/taskforces and what are they? How often do you meet? Are you an advisory Council or a typical board of directors?

For Advisory Councils

Who do you advise (executive director, legislators, commissioners, governor)? How often and how formal is the advisory communication process? What are the functions of the advisory board? Do you provide advice as to use of funds, raising of funds, program implementation or prioritization, legislative agenda or public policy direction? How is this accomplished? What are the most significant challenges to fulfilling your roles? In what manner are you most effective?

Fund Raising

What is total budget and what percentage is coming from following four sources: Government, national grants, state, business contributions, foundations and individual contributions? How do you go about soliciting funds from private and business entities? Does the board work in partnership with the executive director to raise funds or is this a staff responsibility? Does some other organization undertake fund raising? Do you have a permanent endowment? Do you do an annual appeal?

Programmatic/Fund Allocation

Does the board determine fund allocation and program direction setting? How does the board monitor the effectiveness of programs? Is fund allocation based on consistency with the organization's mission and/or program effectiveness or some other means?

Advocacy

Does the board provide information and resources to child advocates, lawmakers, lobbyists and concerned citizens regarding the work of the Trust Fund? Is the board a catalyst to protect or expand the Trust Fund at the state, local and federal level? Does some other organization undertake advocacy for the Trust Fund and its programs? Have there been significant changes to advocacy efforts in recent year and if so what?

Public Engagement/Education/Communication

Is the Trust Fund Board/Council the primary link to the community, public and media? Who articulates the organizations mission, accomplishments and goals to the public? How does the Board/Council go about garnering support from important members of the community? Does the Board/Council play a significant role in a comprehensive public relations strategy?

Support

In what other ways does the board/council support the Trust Fund? Do you provide pro-bono work to assist staff with special projects? Are members expected to contribute funds, suggest new programs, provide entry to influential people or engage a high profile host/honorary chair?



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What are Adverse Child Experiences (ACEs)?

ACEs are stressful or traumatic experiences that include the following categories (with prevalence):

- Physical abuse (28%)
- Sexual abuse (21%)
- Emotional abuse (11%)
- Neglect: Emotional (15%), Physical (10%)
- Mental ill, depressed or suicidal person in the home (17%)
- Alcoholic or drug addicted care giver (27%)
- Witnessing domestic violence against the mother or step-mother (13%)
- Incarceration of any family member (6%)
- Loss of a parent to death, abandonment, or divorce (23%)

ACE Score

Calculate individual ACE Score by adding the number of different categories of ACEs, not the intensity or frequency of a single category. The higher the ACE Score, the greater the incidence of co-occurring conditions from this list.

ACEs are common. ACEs tend to occur in clusters. More ACEs result in more health and social problems. And the resulting effects of ACEs will vary from person to person.

Why are ACEs important?

Adverse Childhood Experiences (ACE) are the most powerful determinate of public health and social functioning.¹

ACEs Affect Childhood Brain Development

The toxic stress children may experience during sensitive periods of brain development lead to emotional, social and cognitive impairments. Those impairments lead to behaviors that in turn cause expensive health and social problems.

ACEs in Washington State

Washington State is the first in the nation to have detailed information about ACE prevalence and its relationship to mental, physical, behavioral health, and other factors that affect worker performance, parenting and intergenerational transmission of trauma. The importance of ACEs in Washington is documented in the following report, *Adverse Childhood Experience & Population Health in Washington: The Face of a Chronic Public Health Disaster*, located on the Family Policy Council website: <http://www.fpc.wa.gov/publications/ACEs%20in%20Washington.2009%20BRESS.Final%20Report%207%2007%202010.pdf>

¹ The original ACE study, a collaboration between the Centers for Disease Control (CDC) and Kaiser Permanente HMO, was initiated in 1994 with over 17,000 enrolled insurance recipients in San Diego, CA. Attention to the childhood origins of a myriad of health and social problems across the lifespan illuminates the enormous impact on population health and resulting cost.

Health and Social Problems Caused by ACEs

Diseases	Ischemic heart disease, cancer, chronic lung disease, skeletal fractures, sexually transmitted diseases, liver disease, chronic obstructive pulmonary, autoimmune, lung cancer
Risk factors	Smoking, alcohol abuse, promiscuity, obesity, illicit drug use, injection drug use, multiple somatic symptoms, poor self-rated health, high perceived risk of AIDs
Mental Health	Depression, anxiety, hallucination, panic reactions, sleep disturbances, memory disturbances, poor anger control
Sexual and reproduction health	Early age at first intercourse, sexual dissatisfaction, teen pregnancy, unintended pregnancy, teen paternity, fetal death
Health care cost	Prescribed multiple classes of drugs, psychotropics, bronchodilators
Problems in workforce	Absenteeism, low productivity, high perceived stress, impaired job performance, poor family relationships, body pain, addiction, poor health
Family instability	Relationship problems, marriage to an alcoholic, household drug use, risk of perpetuating or being a victim of domestic violence, premature mortality in family members
Poor academic achievement	Learning disability, attention problems, poor social skills, repeated suspensions and expulsions, drop out, low grade point average, criminal behavior
Criminal justice	Victimizations, victim of family violence or rape, perpetrations of criminal acts leading to incarceration

Reducing ACE Prevalence

Categorical approaches to the common and diverse health and social problems caused by ACEs are not effective. The current "siloe" approaches scattered in existing human service systems are understandable from a historical perspective, but to succeed in the future a coordinated effort that links existing human service systems and improves community capacity to reduce ACEs is needed. Community and service improvements must include information about ACEs and their effect on human development that creates a common framework for change. This will contribute to: community norms that effectively build the foundations of healthy development, more meaningful diagnoses, earlier and improved treatment of exposed children and their families, and better integration of health care, prevention, social services, public school systems, and legal venues.

There are more than 50 peer-reviewed publications from the original ACE Study:
<http://www.cdc.gov/ace/outcomes.htm>

More information about Adverse Childhood Experience can be found on the Family Policy Council web-site:
<http://www.fpc.wa.gov/>.

CERTIFICATION OF ENROLLMENT

ENGROSSED SECOND SUBSTITUTE HOUSE BILL 1965

62nd Legislature
2011 1st Special Session

Passed by the House May 23, 2011
Yeas 74 Nays 21

Speaker of the House of Representatives

Passed by the Senate May 22, 2011
Yeas 34 Nays 13

President of the Senate

Approved

Governor of the State of Washington

CERTIFICATE

I, Barbara Baker, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **ENGROSSED SECOND SUBSTITUTE HOUSE BILL 1965** as passed by the House of Representatives and the Senate on the dates hereon set forth.

Chief Clerk

FILED

Secretary of State
State of Washington

ENGROSSED SECOND SUBSTITUTE HOUSE BILL 1965

AS AMENDED BY THE SENATE

Passed Legislature - 2011 1st Special Session

State of Washington 62nd Legislature 2011 1st Special Session

By House Ways & Means (originally sponsored by Representatives Kagi, Jinkins, Frockt, and Kenney)

READ FIRST TIME 04/01/11.

1 AN ACT Relating to public and private partnership in addressing
2 adverse childhood experiences; amending RCW 13.40.462, 43.121.100,
3 43.215.146, 43.215.147, 43.70.555, 74.14A.060, and 70.190.040; adding
4 a new section to chapter 28A.300 RCW; adding a new chapter to Title 70
5 RCW; creating a new section; recodifying RCW 70.190.040; repealing RCW
6 43.121.010, 43.121.015, 43.121.020, 43.121.030, 43.121.040, 43.121.050,
7 43.121.060, 43.121.070, 43.121.080, 43.121.110, 43.121.120, 43.121.130,
8 43.121.140, 43.121.150, 43.121.160, 43.121.185, 43.121.910, 70.190.005,
9 70.190.010, 70.190.020, 70.190.100, 70.190.110, 70.190.120, 70.190.130,
10 70.190.150, 70.190.920, and 74.14C.050; and providing effective dates.

11 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

12 NEW SECTION. **Sec. 1.** The legislature finds that adverse childhood
13 experiences are a powerful common determinant of a child's ability to
14 be successful at school and, as an adult, to be successful at work, to
15 avoid behavioral and chronic physical health conditions, and to build
16 healthy relationships. The purpose of this chapter is to identify the
17 primary causes of adverse childhood experiences in communities and to
18 mobilize broad public and private support to prevent harm to young
19 children and reduce the accumulated harm of adverse experiences

1 throughout childhood. A focused effort is needed to: (1) Identify and
2 promote the use of innovative strategies based on evidence-based and
3 research-based approaches and practices; and (2) align public and
4 private policies and funding with approaches and strategies which have
5 demonstrated effectiveness.

6 The legislature recognizes that many community public health and
7 safety networks across the state have knowledge and expertise regarding
8 the reduction of adverse childhood experiences and can provide
9 leadership on this initiative in their communities. In addition, a
10 broad range of community coalitions involved with early learning, child
11 abuse prevention, and community mobilization have coalesced in many
12 communities. The adverse childhood experiences initiative should
13 coordinate and assemble the strongest components of these networks and
14 coalitions to effectively respond to the challenge of reducing and
15 preventing adverse childhood experiences while providing flexibility
16 for communities to design responses that are appropriate for their
17 community.

18 NEW SECTION. **Sec. 2.** The definitions in this section apply
19 throughout this chapter unless the context clearly requires otherwise.

20 (1) "Adverse childhood experiences" means the following indicators
21 of severe childhood stressors and family dysfunction that, when
22 experienced in the first eighteen years of life and taken together, are
23 proven by public health research to be powerful determinants of
24 physical, mental, social, and behavioral health across the lifespan:
25 Child physical abuse; child sexual abuse; child emotional abuse; child
26 emotional or physical neglect; alcohol or other substance abuse in the
27 home; mental illness, depression, or suicidal behaviors in the home;
28 incarceration of a family member; witnessing intimate partner violence;
29 and parental divorce or separation. Adverse childhood experiences have
30 been demonstrated to affect the development of the brain and other
31 major body systems.

32 (2) "Community public health and safety networks" or "networks"
33 means the organizations authorized under RCW 70.190.060.

34 (3) "Department" means the department of social and health
35 services.

36 (4) "Director" means the director of the department of early
37 learning.

- 1 (5) "Evidence-based" has the same meaning as in RCW 43.215.146.
2 (6) "Research-based" has the same meaning as in RCW 43.215.146.
3 (7) "Secretary" means the secretary of social and health services.

4 NEW SECTION. **Sec. 3.** (1)(a) The secretary of the department of
5 social and health services and the director of the department of early
6 learning shall actively participate in the development of a
7 nongovernmental private-public initiative focused on coordinating
8 government and philanthropic organizations' investments in the positive
9 development of children and preventing and mitigating the effects of
10 adverse childhood experiences. The secretary and director shall
11 convene a planning group to work with interested private partners to:
12 (i) Develop a process by which the goals identified in section 1 of
13 this act shall be met; and (ii) develop recommendations for inclusive
14 and diverse governance to advance the adverse childhood experiences
15 initiative.

16 (b) The secretary and director shall select no more than twelve to
17 fifteen persons as members of the planning group. The members selected
18 must represent a diversity of interests including: Early learning
19 coalitions, community public health and safety networks, organizations
20 that work to prevent and address child abuse and neglect, tribes,
21 representatives of public agency agencies involved with interventions
22 in or prevention of adverse childhood experiences, philanthropic
23 organizations, and organizations focused on community mobilization.

24 (c) The secretary and director shall cochair the planning group
25 meetings and shall convene the first meeting.

26 (2) The planning group shall submit a report on its progress and
27 recommendations to the appropriate legislative committees no later than
28 December 15, 2011.

29 (3) In addition to other powers granted to the secretary, the
30 secretary may:

31 (a) Enter into contracts on behalf of the department to carry out
32 the purposes of this chapter;

33 (b) Provide funding to communities or any governance entity that is
34 created as a result of the partnership; and

35 (c) Accept gifts, grants, or other funds for the purposes of this
36 chapter.

1 **Sec. 4.** RCW 13.40.462 and 2006 c 304 s 2 are each amended to read
2 as follows:

3 (1) The department of social and health services juvenile
4 rehabilitation administration shall establish a reinvesting in youth
5 program that awards grants to counties for implementing research-based
6 early intervention services that target juvenile justice-involved youth
7 and reduce crime, subject to the availability of amounts appropriated
8 for this specific purpose.

9 (2) Effective July 1, 2007, any county or group of counties may
10 apply for participation in the reinvesting in youth program.

11 (3) Counties that participate in the reinvesting in youth program
12 shall have a portion of their costs of serving youth through the
13 research-based intervention service models paid for with moneys from
14 the reinvesting in youth account established pursuant to RCW 13.40.466.

15 (4) The department of social and health services juvenile
16 rehabilitation administration shall review county applications for
17 funding through the reinvesting in youth program and shall select the
18 counties that will be awarded grants with funds appropriated to
19 implement this program. The department, in consultation with the
20 Washington state institute for public policy, shall develop guidelines
21 to determine which counties will be awarded funding in accordance with
22 the reinvesting in youth program. At a minimum, counties must meet the
23 following criteria in order to participate in the reinvesting in youth
24 program:

25 (a) Counties must match state moneys awarded for research-based
26 early intervention services with nonstate resources that are at least
27 proportional to the expected local government share of state and local
28 government cost avoidance that would result from the implementation of
29 such services;

30 (b) Counties must demonstrate that state funds allocated pursuant
31 to this section are used only for the intervention service models
32 authorized pursuant to RCW 13.40.464;

33 (c) Counties must participate fully in the state quality assurance
34 program established in RCW 13.40.468 to ensure fidelity of program
35 implementation. If no state quality assurance program is in effect for
36 a particular selected research-based service, the county must submit a
37 quality assurance plan for state approval with its grant application.

1 Failure to demonstrate continuing compliance with quality assurance
2 plans shall be grounds for termination of state funding; and

3 (d) Counties that submit joint applications must submit for
4 approval by the department of social and health services juvenile
5 rehabilitation administration multicounty plans for efficient program
6 delivery.

7 ~~((5) The department of social and health services juvenile
8 rehabilitation administration shall convene a technical advisory
9 committee comprised of representatives from the house of
10 representatives, the senate, the governor's office of financial
11 management, the department of social and health services juvenile
12 rehabilitation administration, the family policy council, the juvenile
13 court administrator's association, and the Washington association of
14 counties to assist in the implementation of chapter 304, Laws of
15 2006.))~~

16 **Sec. 5.** RCW 43.121.100 and 2011 c 171 s 9 are each amended to read
17 as follows:

18 ~~((The council may accept))~~ Contributions, grants, or gifts in cash
19 or otherwise, including funds generated by the sale of "heirloom" birth
20 certificates under chapter 70.58 RCW from persons, associations, or
21 corporations and funds generated through the issuance of the "Keep Kids
22 Safe" license plate under chapter 46.18 RCW ~~((All moneys received by
23 the council or any employee thereof from contributions, grants, or
24 gifts and not through appropriation by the legislature))~~, shall be
25 deposited in a depository approved by the state treasurer to be known
26 as the children's trust fund. Disbursements of such funds shall be on
27 the authorization of the ~~((council or a duly authorized representative
28 thereof and only for the purposes stated in RCW 43.121.050))~~ director
29 of the department of early learning beginning July 1, 2012. In order
30 to maintain an effective expenditure and revenue control, such funds
31 shall be subject in all respects to chapter 43.88 RCW, but no
32 appropriation shall be required to permit expenditure of such funds.

33 **Sec. 6.** RCW 43.215.146 and 2007 c 466 s 2 are each amended to read
34 as follows:

35 The definitions in this section apply throughout this section and

1 RCW ((43.121.170 through)) 43.215.145, 43.215.147, and 43.121.185
2 unless the context clearly requires otherwise.

3 (1) "Evidence-based" means a program or practice that has had
4 multiple site random controlled trials across heterogeneous populations
5 demonstrating that the program or practice is effective for the
6 population.

7 (2) "Home visitation" means providing services in the permanent or
8 temporary residence, or in other familiar surroundings, of the family
9 receiving such services.

10 (3) "Research-based" means a program or practice that has some
11 research demonstrating effectiveness, but that does not yet meet the
12 standard of evidence-based practices.

13 **Sec. 7.** RCW 43.215.147 and 2008 c 152 s 6 are each amended to read
14 as follows:

15 (1) Within available funds, the ((~~council for children and~~
16 ~~families~~)) department shall fund evidence-based and research-based home
17 visitation programs for improving parenting skills and outcomes for
18 children. Home visitation programs must be voluntary and must address
19 the needs of families to alleviate the effect on child development of
20 factors such as poverty, single parenthood, parental unemployment or
21 underemployment, parental disability, or parental lack of high school
22 diploma, which research shows are risk factors for child abuse and
23 neglect and poor educational outcomes. In order to maximize
24 opportunities to obtain matching funds from private entities, general
25 funds intended to support home visiting funding shall be appropriated
26 to the home visiting services account established in RCW 43.215.130.

27 (2) The ((~~council for children and families shall develop a plan~~))
28 department shall work with the department of social and health
29 services, the department of health(~~(, the department of early learning,~~
30 ~~and the family policy council))~~), the private-public partnership created
31 in RCW 43.215.070, and key partners and stakeholders to develop a plan
32 to coordinate or consolidate home visitation services for children and
33 families ((and report to the appropriate committees of the legislature
34 by December 1, 2007, with their recommendations for implementation of
35 the plan)) to the extent practicable.

1 **Sec. 8.** RCW 43.70.555 and 1998 c 245 s 77 are each amended to read
2 as follows:

3 The department(~~(, in consultation with the family policy council~~
4 ~~created in chapter 70.190 RCW,)) shall establish, by rule, standards~~
5 for local health departments and networks to use in assessment,
6 performance measurement, policy development, and assurance regarding
7 social development to prevent health problems caused by risk factors
8 empirically linked to: Violent criminal acts by juveniles, teen
9 substance abuse, teen pregnancy and male parentage, teen suicide
10 attempts, dropping out of school, child abuse or neglect, and domestic
11 violence. The standards shall be based on the standards set forth in
12 the public health services improvement plan as required by RCW
13 43.70.550.

14 **NEW SECTION. Sec. 9.** (1) Beginning July 1, 2011, the council for
15 children and families and the department of early learning shall
16 develop a plan for transitioning the work of the council for children
17 and families, including public awareness campaigns, to the department
18 of early learning. The council for children and families and the
19 department of early learning shall participate in the development of
20 the private-public initiative in order to streamline efforts around the
21 prevention of child abuse and neglect and avoid duplication of effort.

22 (2) The executive director of the council for children and families
23 and the director of the department of early learning shall consult with
24 the planning group convened in section 3 of this act to develop
25 strategies to maximize Washington's leverage and match of federal child
26 abuse and neglect prevention moneys.

27 (3) No later than January 1, 2012, the council for children and
28 families and the department of early learning shall report to the
29 appropriate committees of the legislature on its transition plan.

30 **Sec. 10.** RCW 74.14A.060 and 2000 c 219 s 2 are each amended to
31 read as follows:

32 Within available funds, the secretary of the department of social
33 and health services shall (~~charge appropriated funds to~~) support
34 blended funding projects for youth (~~subject to any current or future~~
35 ~~waiver the department receives to the requirements of IV-E funding~~).
36 To be eligible for blended funding a child must be eligible for

1 services designed to address a behavioral, mental, emotional, or
2 substance abuse issue from the department of social and health services
3 and require services from more than one categorical service delivery
4 system. Before any blended funding project is established by the
5 secretary, any entity or person proposing the project shall seek input
6 from the public health and safety network or networks established in
7 the catchment area of the project. The network or networks shall
8 submit recommendations on the blended funding project to the ~~((family
9 policy council))~~ private-public initiative described in section 3 of
10 this act. The ~~((family policy council))~~ private-public initiative
11 shall advise the secretary whether to approve the proposed blended
12 funding project. The network shall review the proposed blended funding
13 project pursuant to its authority to examine the decategorization of
14 program funds under RCW 70.190.110, within the current appropriation
15 level. The department shall document the number of children who
16 participate in blended funding projects, the total blended funding
17 amounts per child, the amount charged to each appropriation by program,
18 and services provided to each child through each blended funding
19 project and report this information to the appropriate committees of
20 the legislature by December 1st of each year, beginning in December 1,
21 2000.

22 **Sec. 11.** RCW 70.190.040 and 1993 c 336 s 901 are each amended to
23 read as follows:

24 (1) The legislature finds that helping children to arrive at school
25 ready to learn is an important part of improving student learning.

26 (2) To the extent funds are appropriated, the ~~((family policy
27 council))~~ superintendent of public instruction shall award grants to
28 community-based consortiums that submit comprehensive plans that
29 include strategies to improve readiness to learn.

30 NEW SECTION. **Sec. 12.** The following acts or parts of acts, as now
31 existing or hereafter amended, are each repealed, effective June 30,
32 2012:

33 (1) RCW 43.121.010 (Legislative declaration, intent) and 1982 c 4
34 s 1;

35 (2) RCW 43.121.015 (Definitions) and 2008 c 152 s 8, 1988 c 278 s
36 4, & 1987 c 351 s 2;

- 1 (3) RCW 43.121.020 (Council established--Members, chairperson--
2 Appointment, qualifications, terms, vacancies) and 2008 c 152 s 7, 2007
3 c 144 s 1, 1996 c 10 s 1, 1994 c 48 s 1, 1989 c 304 s 4, 1987 c 351 s
4 3, 1984 c 261 s 1, & 1982 c 4 s 2;
- 5 (4) RCW 43.121.030 (Compensation and travel expenses of members)
6 and 1984 c 287 s 87 & 1982 c 4 s 3;
- 7 (5) RCW 43.121.040 (Executive director, salary--Staff) and 1982 c
8 4 s 4;
- 9 (6) RCW 43.121.050 (Council powers and duties--Generally--Rules)
10 and 1988 c 278 s 5, 1987 c 351 s 4, & 1982 c 4 s 5;
- 11 (7) RCW 43.121.060 (Contracts for services--Scope of programs--
12 Funding) and 1982 c 4 s 6;
- 13 (8) RCW 43.121.070 (Contracts for services--Factors in awarding)
14 and 1982 c 4 s 7;
- 15 (9) RCW 43.121.080 (Contracts for services--Partial funding by
16 administering organization, what constitutes) and 1982 c 4 s 8;
- 17 (10) RCW 43.121.110 (Parenting skills--Legislative findings) and
18 1988 c 278 s 1;
- 19 (11) RCW 43.121.120 (Community-based early parenting skills
20 programs--Funding) and 1988 c 278 s 2;
- 21 (12) RCW 43.121.130 (Decreased state funding of parenting skills
22 programs--Evaluation) and 1998 c 245 s 48 & 1988 c 278 s 3;
- 23 (13) RCW 43.121.140 (Shaken baby syndrome--Outreach campaign) and
24 1993 c 107 s 2;
- 25 (14) RCW 43.121.150 (Juvenile crime--Legislative findings) and 1997
26 c 338 s 56;
- 27 (15) RCW 43.121.160 (Postpartum depression--Public information and
28 communication outreach campaign) and 2005 c 347 s 2;
- 29 (16) RCW 43.121.185 (Children's trust of Washington renamed) and
30 2008 c 152 s 5 & 2007 c 466 s 4; and
- 31 (17) RCW 43.121.910 (Severability--1982 c 4) and 1982 c 4 s 15.

32 **NEW SECTION. Sec. 13.** The following acts or parts of acts, as now
33 existing or hereafter amended, are each repealed, effective June 30,
34 2012:

- 35 (1) RCW 70.190.005 (Purpose) and 1994 sp.s. c 7 s 301 & 1992 c 198
36 s 1;

- 1 (2) RCW 70.190.010 (Definitions) and 2009 c 565 s 52, 2009 c 479 s
2 58, 1996 c 132 s 2, 1995 c 399 s 200, & 1992 c 198 s 3;
- 3 (3) RCW 70.190.020 (Consolidate efforts of existing entities) and
4 1994 sp.s. c 7 s 315 & 1992 c 198 s 4;
- 5 (4) RCW 70.190.100 (Duties of council) and 2009 c 479 s 59, 1998 c
6 245 s 123, & 1994 sp.s. c 7 s 307;
- 7 (5) RCW 70.190.110 (Program review) and 1998 c 245 s 124 & 1994
8 sp.s. c 7 s 308;
- 9 (6) RCW 70.190.120 (Interagency agreement) and 1994 sp.s. c 7 s
10 309;
- 11 (7) RCW 70.190.130 (Comprehensive plan--Approval process--Network
12 expenditures--Penalty for noncompliance with chapter) and 1998 c 314 s
13 13, 1996 c 132 s 8, & 1994 sp.s. c 7 s 310;
- 14 (8) RCW 70.190.150 (Federal restrictions on funds transfers,
15 waivers) and 1994 sp.s. c 7 s 312; and
- 16 (9) RCW 70.190.920 (Effective date--1992 c 198) and 1992 c 198 s
17 21.

18 NEW SECTION. **Sec. 14.** RCW 74.14C.050 (Implementation and
19 evaluation plan) and 1995 c 311 s 9 & 1992 c 214 s 6 are each repealed.

20 NEW SECTION. **Sec. 15.** RCW 70.190.040 is recodified as a section
21 in chapter 28A.300 RCW.

22 NEW SECTION. **Sec. 16.** Sections 1 through 3 of this act constitute
23 a new chapter in Title 70 RCW.

24 NEW SECTION. **Sec. 17.** Section 5 of this act takes effect July 1,
25 2012.

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Governance Fundamentals – Exercise

1. Is your board the correct size for where you want to go? Is it too big or too small? Is the board size written in statute? Do we need to change statute or is there a way to increase by adding additional non-appointees?
2. Is the board member term of duration effective? Do we need term-limits? Does this need to change?
3. Are officer terms, roles and rotations working well? Is there a better way?
4. Is your board structure and organization effective or is it just history and habit? Do you have too few or too many committees/task forces? Are you over or under structured?
5. Is everyone contributing or is only one person(s) doing all the work of the board? Do you have a board “job fair” to get members to sign-up for activities? Do you inventory skills and where board members are interested in helping out?
6. Is your meeting schedule appropriate? Re you meeting more often than needed or less often? (Remember this is about where you want to go, not where you have been.) Is the time, day, and location of the meeting most appropriate?
7. Are your meetings about critical issues or just show and tell for the executive director? Are the meetings effective and efficient? What changes could be made?
8. Are your bylaws up to date – do they allow the use of electronics in the board room, ad-hoc committees as needed, voting by e-mail and other practices commonly employed today by boards?